

Missouri

UNIFORM APPLICATION
FY 2018 BEHAVIORAL HEALTH REPORT
COMMUNITY MENTAL HEALTH SERVICES
BLOCK GRANT

OMB - Approved 06/07/2017 - Expires
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Center for Mental Health Services
Division of State and Community Systems Development

I: State Information

State Information

State DUNS Number

Number 780871430

Expiration Date

I. State Agency to be the Grantee for the Block Grant

Agency Name Missouri Department of Mental Health

Organizational Unit Division of Behavioral Health

Mailing Address P.O. Box 687

City Jefferson City

Zip Code 65102-0687

II. Contact Person for the Grantee of the Block Grant

First Name Mark

Last Name Stringer

Agency Name Missouri Department of Mental Health

Mailing Address P.O. Box 687

City Jefferson City

Zip Code 65101-0687

Telephone 573-751-4942

Fax

Email Address mark.stringer@dmh.mo.gov

III. State Expenditure Period (Most recent State expenditure period that is closed out)

From

To

IV. Date Submitted

NOTE: This field will be automatically populated when the application is submitted.

Submission Date 10/16/2017 9:02:44 AM

Revision Date

V. Contact Person Responsible for Report Submission

First Name

Last Name

Telephone

Fax

Email Address

Footnotes:

Missouri does not have any third party administrators managing Mental Health Block Grant funds.

II: Annual Report

MHBG Table 1 Priority Area and Annual Performance Indicators - Progress Report

Priority #: 1

Priority Area: Coordination of Primary Care and Behavioral Health Services

Priority Type: SAT, MHS

Population(s): SMI, SED

Goal of the priority area:

Coordinate consumers' primary and behavioral healthcare in order to improve consumer health and reduce medical costs

Strategies to attain the goal:

- 1) Continue to coordinate preventive and primary care for Health Home participants
- 2) Conduct pilot of Children's Health Home project focusing on children with serious emotional disturbance and obesity
- 3) Continue outreach to Medicaid-enrolled adults who 1) have a substance use disorder or serious mental illness, 2) have high annual healthcare costs, and 3) are not currently enrolled in behavioral health treatment
- 4) Contract with the Missouri Institute for Mental Health for ongoing evaluation of Missouri's Health Homes and Disease Management programs

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of participants in Health Homes per fiscal year

Baseline Measurement: 25,278 (FY 2014)

First-year target/outcome measurement: 25,800

Second-year target/outcome measurement: 26,200

New Second-year target/outcome measurement(if needed):

Data Source:

Number of Health Homes participants is determined from a Per Member Per Month (PMPM) data file submitted to DMH from the Missouri Medicaid agency MO Healthnet on a monthly basis. These are individuals who participated at any time during the specified fiscal year.

New Data Source(if needed):

Description of Data:

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of participants in Health Homes in FY 2016 is 35,755.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of Health Home participants in FY 2017 is 33,017

Indicator #: 2

Indicator: Number of participants in DM 3700 per fiscal year

Baseline Measurement: 2,584 (FY 2014)

First-year target/outcome measurement: 2,625

Second-year target/outcome measurement: 2,700

New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system

New Data Source(if needed):

Description of Data:

These are individuals who participated at any time during the specified fiscal year. A participant in the DM 3700 is defined as a consumer who is listed on the DM 3700 master list and who has an open episode of care for CPS treatment during the specified fiscal year.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of participants in DM 3700 in FY 2016 is 3,636

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of participants in DM 3700 in FY 2017 is 4,362

Indicator #: 3

Indicator: Number of participants in ADA Disease Management

Baseline Measurement: 187 (FY 2014)

First-year target/outcome measurement: 800

Second-year target/outcome measurement: 1,200

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Information System

New Data Source(if needed):**Description of Data:**

A participant in ADA DM is defined as a consumer who is listed on the ADA Disease Management master list and who has an open episode of care for ADA treatment during the specified fiscal year.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:**Report of Progress Toward Goal Attainment**

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

Number of participants in ADA Disease Management in FY 2016 is 806.

Second Year Target: ☐ Achieved ☒ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number of participants in ADA Disease Management in FY 2017 is 929. FY 2017 actual number is greater than baseline and actual number achieved for FY 2016. Proposed change is to modify target.

How second year target was achieved (optional):

Priority #: 2
Priority Area: Crisis Intervention
Priority Type: SAT, MHS
Population(s): SMI, SED

Goal of the priority area:

Promote safety and emotional stability, minimize further deterioration in mental state, increase access to treatment and support services, and improve individual outcomes for individuals in behavioral health crisis; better utilize limited criminal justice and healthcare resources by linking individuals needing behavioral healthcare services to those services

Strategies to attain the goal:

- 1) Identify and address structural barriers, miscommunications, and consistent patterns that reduce access to behavioral healthcare services
- 2) Provide behavioral health expertise to law enforcement, court personnel, and primary healthcare staff in order to more effectively respond to behavioral health crises
- 3) Advocate for and engage individuals in crisis in behavioral health treatment and support services
- 4) Provide immediate person-centered interventions to individuals in mental health crisis and facilitate timely access to services and supports

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of referrals to the Community Mental Health Liaisons
Baseline Measurement: 3,696 (FY 2014)
First-year target/outcome measurement: 5,000
Second-year target/outcome measurement: 5,000
New Second-year target/outcome measurement(if needed):

Data Source:

Number tracked and reported by the Coalition of Community Behavioral Healthcare

New Data Source(if needed):**Description of Data:**

N/A

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

Number of referrals to the Community Mental Health Liaisons in FY 2016 is 8,189.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How second year target was achieved (optional):**

Number of referrals to the Community Mental Health Liaisons in FY 2017 is 8,791.

Indicator #:

2

Indicator:

Number served in the Emergency Room Enhancement project

Baseline Measurement:

852 (FY 2014)

First-year target/outcome measurement:

1,000

Second-year target/outcome measurement:

1,200

New Second-year target/outcome measurement(if needed):**Data Source:**

Number served is tracked and reported by the Missouri Institute for Mental Health

New Data Source(if needed):**Description of Data:**

N/A

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number served in the Emergency Room Enhancement project in FY 2016 is 1,329.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number served in the Emergency Room Enhancement project in FY 2017 is 1,621.

Indicator #: 3

Indicator: Number of new law enforcement officers trained in Crisis Intervention Team

Baseline Measurement: 681 (FY 2014)

First-year target/outcome measurement: at least 400

Second-year target/outcome measurement: at least 400

New Second-year target/outcome measurement(if needed):

Data Source:

Number of law enforcement officers trained in CIT is tracked and reported by NAMI-St. Louis.

New Data Source(if needed):

Description of Data:

N/A

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of new law enforcement officers trained in Crisis Intervention Team in FY 2016 is 800.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of new law law enforcement officers trained in Crisis Intervention Team in FY 2017 is 2,500.

Indicator #: 4

Indicator: Number of calls to the Access Crisis Intervention (ACI) hotlines

Baseline Measurement: 81,908 (FY 2014)

First-year target/outcome measurement: at least 80,000

Second-year target/outcome measurement: at least 80,000

New Second-year target/outcome measurement(if needed):**Data Source:**

Number of ACI calls is tracked and reported by the contracted agencies on a quarterly basis

New Data Source(if needed):**Description of Data:**

N/A

New Description of Data(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

Number of calls to the Access Crisis Intervention (ACI) hotlines in FY 2016 is 83,985.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:**How second year target was achieved (optional):**

Number of calls to the Access Crisis Intervention (ACI) hotlines in FY 2017 is 88,183.

Priority #: 3
Priority Area: Substance Abuse Traffic Offenders' Program (SATOP)
Priority Type: SAT
Population(s): Other (DUI/DWI Offenders)

Goal of the priority area:

Reduce DWI recidivism and initiate treatment services for those with substance use disorder

Strategies to attain the goal:

- 1) Require additional interview questions outside of the Driver Risk Inventory (DRI-II) to ensure assessment consistency
- 2) Implement SATOP-specific continuing education training for SATOP Qualified Professionals
- 3) Evaluate the feasibility of lowering the Blood Alcohol Content (BAC) placement criteria for levels I and II
- 4) Continue to educate judiciary and prosecutors on SATOP screening and referral process

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Implement SATOP specific continuing education training for SATOP Qualified Professionals
Baseline Measurement: N/A
First-year target/outcome measurement: In progress
Second-year target/outcome measurement: Implemented
New Second-year target/outcome measurement(if needed):

Data Source:

Implementation of SATOP training considered complete with the award of Continuing Education Units (CEU).

New Data Source(if needed):**Description of Data:**

N/A

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

Completed in FY 2016.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How second year target was achieved (optional):**

Implemented in FY 2017.

Indicator #: 2

Indicator: Implement a standardized set of interview questions outside of the DRI-II

Baseline Measurement: N/A

First-year target/outcome measurement: In progress

Second-year target/outcome measurement: Implemented

New Second-year target/outcome measurement(if needed):**Data Source:**

Input from the subcommittee of SATOP administrators will be required to develop the interview questions. Required implementation is established in SATOP policy.

New Data Source(if needed):**Description of Data:**

N/A

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Completed in FY 2016.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Implemented in FY 2017.

Priority #: 4

Priority Area: Department of Corrections Community Supervised Offenders

Priority Type: SAT, MHS

Population(s): SMI, PP, Other (Criminal/Juvenile Justice)

Goal of the priority area:

Improve access to clinically appropriate services

Strategies to attain the goal:

- 1) Monitor and target technical assistance to Probation and Parole Officers and treatment providers on the prioritization process for offenders needing substance use disorder treatment in order to facilitate rapid assessment and treatment initiation
- 2) Maintain Memorandum of Understandings (MOU) with the Department of Corrections for coordination of behavioral health treatment services
- 3) Continue the CMHT – Community Mental Health Treatment (mental illness) and MH4 (severe mental illness) programs
- 4) In coordination with DOC, develop a prioritization process for offenders in the CMHT program
- 5) Continue to participate on the DOC Oversight Committee

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of High Priority referrals for substance use treatment

Baseline Measurement: 1,560 (FY 2014)

First-year target/outcome measurement: 1,700

Second-year target/outcome measurement: 1,800

New Second-year target/outcome measurement(if needed): at least 1,600

Data Source:

DMH Information System

New Data Source(if needed):

Description of Data:

Number of High Priority referrals for substance use disorder treatment is determined from admission data in the DMH information system.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Over-estimated use of referral form by parole and probation officers. Oversight committee will meet with parole and probation officers in November to discuss any problems with the use of the form. Revised target for FY 2017.

How first year target was achieved (optional):

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of High Priority referrals for substance use treatment in FY 2017 is 1,790.

Indicator #: 2

Indicator: Current MOU between DMH and DOC?

Baseline Measurement: yes (FY 2014)

First-year target/outcome measurement: yes

Second-year target/outcome measurement: yes

New Second-year target/outcome measurement(if needed):

Data Source:

MOU documentation is maintained by the DMH contracts unit.

New Data Source(if needed):

Description of Data:

N/A

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

MOU between DMH and DOC renewed.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

MOU between DMH and DOC renewed.

Indicator #: 3

Indicator: Number served in CMHT and MH4 programs

Baseline Measurement: 2,214 (FY 2014)

First-year target/outcome measurement: at least 2,000

Second-year target/outcome measurement: at least 2,000

New Second-year target/outcome measurement(if needed): 1,500

Data Source:

DMH Information System

New Data Source(if needed):

Description of Data:

Number served in the CMHT and MH4 programs is determined from billing data in the DMH information system.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Oversight committee is reviewing programs to identify any barriers. Revised target for FY 2017 to 1,500.

How first year target was achieved (optional):

Second Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number served in CMHT and MH4 programs in FY 2017 is 1,356 which is below the target of 1,500 but about the same as the actual number served for FY 2016 (1,350).

How second year target was achieved (optional):

Priority #: 5

Priority Area: Tobacco Prevention / Cessation

Priority Type: SAP, SAT, MHS

Population(s): SMI, SED, Other (Adolescents w/SA and/or MH, Students in College, Rural, Children/Youth at Risk for BH Disorder)

Goal of the priority area:

Reduce tobacco initiation and promote tobacco cessation among vulnerable populations

Strategies to attain the goal:

- 1) Support provider training in tobacco cessation with proven effectiveness
- 2) Promote the inclusion of tobacco cessation in the consumer's behavioral health treatment plan
- 3) Track smoking prevalence in mental health and substance use disorder treatment populations
- 4) Support tobacco cessation on Missouri's college campuses
- 5) Ensure the provision of tobacco enforcement and merchant education:
 - a. Continue contracting with the Food and Drug Administration for the enforcement of federal tobacco control laws
 - b. Maintain a Memorandum of Agreement with the Division of Alcohol and Tobacco Control for state and federal enforcement of tobacco control laws
 - c. Conduct a merchant education visit to every tobacco retailer in the state

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Annual Synar non-compliance rate is less than 20 percent?

Baseline Measurement: yes (FY 2014)

First-year target/outcome measurement: yes

Second-year target/outcome measurement: yes

New Second-year target/outcome measurement(if needed):

Data Source:

Synar rate is determined from annual Synar survey. For FY 2016, this will be completed by October 1, 2016. For FY 2017, this will be completed by October 1, 2017.

New Data Source(if needed):

Description of Data:

N/A

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Synar non-compliance rate was 7.7%.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Synar rate is 13 percent.

Indicator #: 2

Indicator: Number of tobacco retailers visited and provided with retailer educational materials per fiscal year

Baseline Measurement: 5,447 (FY 2014)

First-year target/outcome measurement: at least 5,000

Second-year target/outcome measurement: at least 5,000

New Second-year target/outcome measurement(if needed):

Data Source:

Number of tobacco retailers visited and provided educational materials is documented by prevention agencies, entered into a database by DMH staff, and reported in the State's Annual Synar Report.

New Data Source(if needed):

Description of Data:

N/A

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:****New Data issues/caveats that affect outcome measures:****Report of Progress Toward Goal Attainment**

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

Number of tobacco retailers visited and provided with retailer educational materials in FY 2016 is 5,477.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How second year target was achieved (optional):**

Indicator #: 3

Indicator: Number of nicotine replacement quit kit items distributed on Missouri college campuses per fiscal year

Baseline Measurement: N/A

First-year target/outcome measurement: 567

Second-year target/outcome measurement: 567

New Second-year target/outcome measurement(if needed): at least 100.

Data Source:**New Data Source(if needed):****Description of Data:****New Description of Data:(if needed)****Data issues/caveats that affect outcome measures:****New Data issues/caveats that affect outcome measures:****Report of Progress Toward Goal Attainment**

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

Funding was cut. Revise target for FY 2017 to 'at least 100'.

How first year target was achieved (optional):

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of nicotine replacement quit kit items distributed on Missouri college campuses in FY 2017 is 166.

Priority #: 6

Priority Area: Recovery Support Services

Priority Type: SAT, MHS

Population(s): SMI, SED, PWWDC, IVDUs, Other (Adolescents w/SA and/or MH, Rural, Criminal/Juvenile Justice, Homeless, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

Provide support services to promote sustained recovery from behavioral health disorders

Strategies to attain the goal:

- 1) Continue the five Drop-In Centers and five Peer Support Phone Lines for persons with mental illness
- 2) Maintain a housing unit to administer the Shelter Plus Care grants to provide housing assistance to long-term DMH consumers
- 3) Promote use of IPS Supported Employment
- 4) Implement an enhanced training curriculum for Family Support Specialists
- 5) Implement the ATR IV grant

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of contracts for Consumer Operated Service Programs for persons with mental illness per fiscal year

Baseline Measurement: 10

First-year target/outcome measurement: 10

Second-year target/outcome measurement: 10

New Second-year target/outcome measurement(if needed):

Data Source:

Contracts are maintained by the DMH Contracts Unit.

New Data Source(if needed):

Description of Data:

N/A

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of contracts for Consumer Operated Service Programs for persons with mental illness in FY 2016 is 10.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of contracts for Consumer Operated Service Programs for persons with mental illness in FY 2017 is 10.

Indicator #: 2

Indicator: Number of Supported Employment programs per fiscal year

Baseline Measurement: 11 (FY 2014)

First-year target/outcome measurement: 11

Second-year target/outcome measurement: 12

New Second-year target/outcome measurement(if needed):

Data Source:

The number of IPS Supported Employment programs is tracked by DMH staff.

New Data Source(if needed):

Description of Data:

N/A

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of Supported Employment programs in FY 2016 is 13.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of Supported Employment programs in FY 2017 is 17.

Indicator #: 3

Indicator: Number of trainings using the enhanced curriculum for Family Support Specialists per fiscal year

Baseline Measurement: N/A

First-year target/outcome measurement: 2

Second-year target/outcome measurement: 2

New Second-year target/outcome measurement(if needed):

Data Source:

The number of Family Support trainings is tracked by the Children's Services Unit.

New Data Source(if needed):

Description of Data:

N/A

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of trainings using the enhanced curriculum for Family Support Specialists in FY 2016 is 3.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of trainings using the enhanced curriculum for Family Support Specialists in FY 2017 is 9.

Indicator #: 4

Indicator: Number served in ATR IV

Baseline Measurement: N/A

First-year target/outcome measurement: 1,428

Second-year target/outcome measurement: 1,428

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Information System

New Data Source(if needed):

Description of Data:

Number served in ATR IV will be tracked in the DMH information system. These are consumers who receive a service funded through the ATR IV program.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number served in ATR IV is 3,479.

Second Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number served in ATR IV in FY 2017 is 3,873.

Priority #:

7

Priority Area:

Medication Assisted Treatment for Addiction

Priority Type:

SAT

Population(s):

PWWDC, PP, IVDUs

Goal of the priority area:

To further integrate medication therapy into the substance use disorder treatment service delivery system

Strategies to attain the goal:

- 1) Monitor utilization of MAT by provider and provide technical assistance as needed
- 2) Increase utilization of different addiction medications at a given treatment provider
- 3) In collaboration with the drug manufacturer, Missouri Institute for Mental Health (MIMH), and the St. Louis Drug Courts, conduct an Investigator Trial on Vivitrol initiated prior to jail release
- 4) In collaboration with the Department of Corrections and MIMH, conduct a pilot study on the use of Vivitrol among incarcerated women who are released to the community
- 5) Implement the MAT Grant

Annual Performance Indicators to measure goal success

Indicator #:

1

Indicator:

Number of consumers receiving MAT

Baseline Measurement:

3,753 (FY 2014)

First-year target/outcome measurement:

4,000

Second-year target/outcome measurement:

4,200

New Second-year target/outcome measurement(if needed):

Data Source:

DMH Information System

New Data Source(if needed):

Description of Data:

Number of consumers receiving medication assisted treatment including use of methadone, Vivitrol, naltrexone, buprenorphine/Suboxone/Subsolv, Antabuse, and acamprosate is determined from medication billings to the DMH information system and Medicaid Claims, excluding billings occurring while in detox.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of consumers receiving MAT in FY 2016 is 5,106.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of consumers receiving MAT in FY 2017 is 5,026.

Priority #: 8

Priority Area: Community Advocacy and Education

Priority Type: SAP

Population(s): Other (Rural, Children/Youth at Risk for BH Disorder, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

Create positive community norms; policy change; promote mental wellness; and reduce alcohol, tobacco, and other drug availability in Missouri's communities

Strategies to attain the goal:

- 1) Build state and community capacity by fostering strong partnerships and identifying new opportunities for collaboration
- 2) Further data capacity in support of data-driven strategic planning to include the continuation of the Missouri Study Survey and the Behavioral Health web tool
- 3) Fund evidence-based programming to prevent substance use and bullying among high-risk youth
- 4) Continue the education initiative in Eastern Missouri to address heroin and other opiate drug use

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of heroin and other opiate drug use training and education activities per fiscal year

Baseline Measurement: 80

First-year target/outcome measurement: 80

Second-year target/outcome measurement: 80

New Second-year target/outcome measurement(if needed):

Data Source:

Number of heroin education activities is tracked and reported by the Eastern Regional Support Center.

New Data Source(if needed):

Description of Data:

N/A

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of heroin and other opiate drug use training and education activities in FY 2016 is 101.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of heroin and other opiate drug use training and education activities in FY 2017 is 83.

Indicator #: 2

Indicator: Number of high-risk youth served in prevention programs per fiscal year

Baseline Measurement: 26,691

First-year target/outcome measurement: at least 26,000

Second-year target/outcome measurement: at least 26,000

New Second-year target/outcome measurement(if needed): at least 6,100

Data Source:

Reported by contracted providers

New Data Source(if needed):

Description of Data:

Numbers of high-risk youth served in prevention programs are tracked and reported by contracted providers.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Definition and tracking were changed. Revised target for FY 2017 to 'at least 6,100'.

How first year target was achieved (optional):

Second Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number of high-risk youth served in prevention programs in FY 2017 is 3,873. One prevention provider had staffing issues but issue has since been resolved.

How second year target was achieved (optional):

Indicator #: 3

Indicator: Number of persons trained in Mental Health First Aid by the Regional Support Centers per fiscal year

Baseline Measurement: 1,519 (FY 2014)

First-year target/outcome measurement: 2,200
Second-year target/outcome measurement: 2,200
New Second-year target/outcome measurement(if needed): at least 1,000

Data Source:

Regional Support Centers

New Data Source(if needed):

Description of Data:

The number trained in MHFA are tracked and reported by the Regional Support Centers.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number of persons trained in Mental Health First Aid by the Regional Support Centers in FY 2017 is 1,237. Had trainer turnover that lowered number of trainings.

How first year target was achieved (optional):

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of persons trained in Mental Health First Aid by the Regional Support Centers in FY 2017 is 1,507.

Priority #: 9
Priority Area: School-Based Prevention Education
Priority Type: SAP
Population(s): Other (Rural, Children/Youth at Risk for BH Disorder, Underserved Racial and Ethnic Minorities)

Goal of the priority area:

To delay onset of substance use, reduce use, improve overall school performance, and reduce incidents of violence

Strategies to attain the goal:

- 1) Enhance protective factors and reverse or reduce risk factors for substance use and violence
- 2) Improve academic and social-emotional learning to address risk factors
- 3) Employ interactive techniques that allow for active involvement in learning
- 4) Reinforce prevention skills over time with repeated interventions
- 5) Ensure programming is culturally competent and age appropriate
- 6) Conduct annual fidelity reviews

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Number of students participating in SPIRIT per fiscal year
Baseline Measurement: 7,801 (FY 2014)

First-year target/outcome measurement: at least 7,600

Second-year target/outcome measurement: at least 7,600

New Second-year target/outcome measurement(if needed):

Data Source:

SPIRIT participation is tracked and reported by the program evaluator: Missouri Institute for Mental Health.

New Data Source(if needed):

Description of Data:

SPIRIT participation is tracked and reported by the program evaluator: Missouri Institute for Mental Health.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of students participating in SPIRIT in FY 2017 is 8,031.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of students participating in SPIRIT in FY 2017 is 8,175.

Indicator #: 2

Indicator: Annual report generated?

Baseline Measurement: yes (FY 2014)

First-year target/outcome measurement: yes

Second-year target/outcome measurement: yes

New Second-year target/outcome measurement(if needed):

Data Source:

Missouri Institute for Mental Health

New Data Source(if needed):

Description of Data:

MIMH generates the annual report which is posted to the DMH public website.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Annual report generated for FY 2016.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Annual report generated for FY 2017.

Priority #: 10

Priority Area: Evidence-based Mental Health Practices

Priority Type: MHS

Population(s): SMI, SED

Goal of the priority area:

Continue evidence-based practice to the same standards and fidelity as shown to be effective in research

Strategies to attain the goal:

- 1) Continue support for EBP programs
- 2) Provide on-going monitoring of fidelity in EBP programs

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number served in Integrated Treatment for Co-Occurring Disorders (ITCOD)

Baseline Measurement: 1,750 (FY 2014)

First-year target/outcome measurement: at least 1,600

Second-year target/outcome measurement: at least 1,600

New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system

New Data Source(if needed):

Description of Data:

Number served based on billing data submitted via the DMH information system.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number served in Integrated Treatment for Co-Occurring Disorders (ITCOD) in FY 2016 is 2,109.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number served in Integrated Treatment for Co-Occurring Disorders (ITCOD) in FY 2017 is 2,396.

Indicator #: 2

Indicator: Number served in Assertive Community Treatment (ACT)

Baseline Measurement: 654 (FY 2014)

First-year target/outcome measurement: at least 600

Second-year target/outcome measurement: at least 600

New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system

New Data Source(if needed):

Description of Data:

Number served based on billing data submitted via the DMH information system.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number served in Assertive Community Treatment (ACT) in FY 2016 is 728.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number served in Assertive Community Treatment (ACT) in FY 2017 is 988.

Priority #: 11

Priority Area: IV Drug Users

Priority Type: SAT

Population(s): IVDUs

Goal of the priority area:

Ensure the provision of services to IV drug users in accordance with Substance Abuse Prevention and Treatment Block Grant statutory requirements

Strategies to attain the goal:

- 1) Monitor contractual requirements pertaining to IV drug users
- 2) Continue collecting wait list and capacity management data from contracted providers
- 3) Generate reports for wait list data and interim services billings in support of monitoring efforts
- 4) Increase one-on-one discussions with key provider

Annual Performance Indicators to measure goal success**Indicator #:** 1**Indicator:** Number of IV drug users served in substance use treatment per fiscal year (assuming same level of funding)**Baseline Measurement:** 9,288 (FY 2014)**First-year target/outcome measurement:** at least 9,000**Second-year target/outcome measurement:** at least 9,000**New Second-year target/outcome measurement(if needed):****Data Source:**

DMH information system

New Data Source(if needed):**Description of Data:**

Number served based on billing data submitted to the DMH information system. These are individuals for whom a paid claim on a substance use disorder treatment program was submitted to and paid by DMH. Injection drug use is determined from the TEDS data also captured in the DMH information system. The route of substance was IV injection or non-IV injection on the primary, secondary, or tertiary substances.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:**Report of Progress Toward Goal Attainment**First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)**Reason why target was not achieved, and changes proposed to meet target:****How first year target was achieved (optional):**

Number of IV drug users served in SUD treatment in FY 2016 is 10,319.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)**Reason why target was not achieved, and changes proposed to meet target:****How second year target was achieved (optional):**

Number of IV drug users served in SUD treatment in FY 2017 is 10,860.

Indicator #: 2**Indicator:** Percent of SAPT Block Grant funded providers reporting wait list and capacity management data**Baseline Measurement:** 100% (FY 2014)**First-year target/outcome measurement:** 100%

Second-year target/outcome measurement: 100%

New Second-year target/outcome measurement(if needed):

Data Source:

DBH Research staff monitor wait list and capacity management reporting and follow-up with providers if they do not meet submission deadlines.

New Data Source(if needed):

Description of Data:

DBH Research staff monitor wait list and capacity management reporting and follow-up with providers if they do not meet submission deadlines.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Percent of Block Grant funded providers reporting wait list data in FY 2016 is 100%.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Percent of Block Grant funded providers reporting wait list data in FY 2017 is 100%.

Priority #: 12

Priority Area: Substance-Abusing Pregnant Women and Women with Dependent Children

Priority Type: SAT

Population(s): PWWDC

Goal of the priority area:

Continue to provide services to pregnant women and women with dependent children

Strategies to attain the goal:

- 1) Monitor contractual compliance with regard to admission of pregnant women to substance use disorder treatment
- 2) Continue collecting wait list and capacity management data from contracted providers
- 3) Engage TANF referred individuals in substance use disorder treatment at a clinically appropriate level of care

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: 1) Number of pregnant women and women with dependent children served in substance use disorder treatment per fiscal year (assuming the same level of funding)

Baseline Measurement: 6,307 (FY 2014)

First-year target/outcome measurement: at least 6,000

Second-year target/outcome measurement: at least 6,000

New Second-year target/outcome measurement(if needed):

Data Source:

DMH information system

New Data Source(if needed):

Description of Data:

The number of pregnant women and women with dependent children served is captured in the DMH information system. These are individuals for which a paid claim was submitted to and paid by DMH. Pregnancy status and number of dependent children are also captured.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of pregnant women and women with dependent children served in substance abuse treatment in FY 2016 is 6,267.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of pregnant women and women with dependent children served in substance abuse treatment in FY 2017 is 6,348.

Priority #: 13

Priority Area: Infectious Disease Prevention and Treatment

Priority Type: SAT

Population(s): HIV EIS, TB

Goal of the priority area:

Reduce the incidence of HIV/TB/STDs/Hepatitis among consumers in substance use disorder treatment and those in close contact with consumers; have all consumers get screened for HIV/TB/STDs/Hepatitis; and have consumers needing treatment for HIV/TB/STDs/Hepatitis get linked to the appropriate services

Strategies to attain the goal:

- 1) Contractually require programs to
 - a. Have a working relationship with the local health department, physician, or other qualified healthcare provider in the community to provide any necessary testing services for HIV/TB/STDs/HepatitisArrange for HIV/TB/STDs/Hepatitis testing to be available to the client at any time during the course of the client's treatment,
 - b. Provide post-testing counseling for clients testing positive for HIV or TB, and
 - c. Provide education to clients and family members on the risks of HIV/TB/STDs/Hepatitis
- 2) Continue to track TB-related expenditures as required by federal regulations §96.127
- 3) Provide infectious disease training to provider staff

Annual Performance Indicators to measure goal success

Indicator #: 1
Indicator: Conducted survey of providers and developed technical assistance plan?
Baseline Measurement: N/A
First-year target/outcome measurement: In progress
Second-year target/outcome measurement: Completed
New Second-year target/outcome measurement(if needed):

Data Source:

Workgroup progress report

New Data Source(if needed):

Description of Data:

Survey instrument will be developed by a workgroup consisting of DBH clinical treatment and research staff. Information from the survey as well as data from the DMH information system pertaining to HIV/TB/STDs/Hepatitis will be used to develop a plan for training and technical assistance.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Survey completed. Workgroup meeting weekly. Plan in development.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Survey completed in FY 2016. Plans incorporated into Health Home project.

Priority #: 14
Priority Area: Mental Health Services for Transition-Aged Youth and Young Adults
Priority Type: MHS
Population(s): SMI, SED

Goal of the priority area:

To increase knowledge of effective interventions and supports and enhance skills of individuals who work with transition age youth/young adults and their families

Strategies to attain the goal:

- 1) Develop a Transitional Age Youth/Young Adult training presentation for community system of care providers that will
 - Provide information on important developmental interventions
 - Identify and individualize important learning objectives for audience members
 - Identify and increase awareness of resources necessary for effective transition services and supports
- 2) Conduct "Transition Age Youth/Young Adult" presentations at conferences or workshops
- 3) Develop a "template" training presentation for community system of care providers that can be customized by the Community System of Care teams

Annual Performance Indicators to measure goal success**Indicator #:** 1**Indicator:** Number of new communities that customize the "template" training presentation to their local system of care per fiscal year**Baseline Measurement:** N/A**First-year target/outcome measurement:** 1**Second-year target/outcome measurement:** 2**New Second-year target/outcome measurement(if needed):****Data Source:**

Tracked and reported by the Children's Unit.

New Data Source(if needed):**Description of Data:**

Tracked and reported by the Children's Unit.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:**Report of Progress Toward Goal Attainment**First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)**Reason why target was not achieved, and changes proposed to meet target:****How first year target was achieved (optional):**

Number of new communities that customize the "template" training presentation to their local system of care in FY 2016 is 1.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)**Reason why target was not achieved, and changes proposed to meet target:****How second year target was achieved (optional):**

Number of new communities that customize the "template" training presentation to their local system of care in FY 2017 is 3.

Indicator #: 2**Indicator:** Number of conference or workshop trainings on Transition Age Youth/Young Adult per fiscal year**Baseline Measurement:** 6 (FY 2014)**First-year target/outcome measurement:** at least 1**Second-year target/outcome measurement:** at least 2**New Second-year target/outcome measurement(if needed):****Data Source:**

Tracked and reported by the Children's Unit.

New Data Source(if needed):

Description of Data:

Tracked and reported by the Children's Unit.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

Number of conference or workshop trainings on Transition Age Youth/Young Adult in FY 2016 is 20.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How second year target was achieved (optional):**

Number of conference or workshop trainings on Transition Age Youth/Young Adult in FY 2017 is 16.

Indicator #:

3

Indicator:

Resource webpage for Transition Age Youth/Young Adult?

Baseline Measurement:

N/A

First-year target/outcome measurement: In progress

Second-year target/outcome measurement: Implemented

New Second-year target/outcome measurement(if needed):**Data Source:**

Children's Unit will track and report progress on resource webpage.

New Data Source(if needed):**Description of Data:**

Webpage implementation defined as when page(s) are placed into production.

New Description of Data:(if needed)**Data issues/caveats that affect outcome measures:**

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How first year target was achieved (optional):**

Resource webpage for Transition Age Youth/Young Adult is complete.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:**How second year target was achieved (optional):**

Resource webpage for Transition Age Youth/Young Adult completed in FY 2016.

Priority #: 15

Priority Area: Behavioral Healthcare Services for Children

Priority Type: SAT, MHS

Population(s): SED, Other (Adolescents w/SA and/or MH)

Goal of the priority area:

To enhance Children's Behavioral Health services by increasing the knowledge of effective services, supports and interventions, enhancing the skills of service providers and expanding services based on the needs of the children, youth and families served.

Strategies to attain the goal:

- 1) Expand access to Treatment Family Homes (TFH), Parent Professional Homes (PPH) and Family Support Providers (FSP) to children, youth and their families receiving services through the Adolescent C-STAR Program.
 - Revise MO State Plan to include TFH, PPH and FSP services for Adolescent C-STAR and propose to CMS. Continue to revise proposal as needed in response to CMS review and feedback.
 - Develop training curriculum related to TFH, PPH and FSP services and the specific needs of children, youth and their families eligible for Adolescent C-STAR services
 - Pending CMS approval of CSTAR revised MO State Plan proposal, provide training to DBH service providers using curriculum developed related to TFH, PPH and FSP services and the specific needs of children, youth and their families eligible for Adolescent C-STAR services.
- 2) Depending on the state of the economy as directed by state government, prepare to submit a budget request for increased funding to support additional ACT Teams for Transitional Age Youth.
- 3) Include a "monthly" news blast section in existing DBH Newsletter to distribute articles, research and stories specific to behavioral health and early childhood, children, youth and their families.
- 4) Develop a partnership with the Department of Elementary and Secondary Education (DESE) to improve transition planning and services from high school to post-secondary education and/or employment for children and youth receiving DBH services.
 - DBH Staff from children's services and employment services will participate on a state level transitions team with DESE to develop strategies for expanding and enhancing local school-based transition teams.
- 5) DBH service providers will actively participate on local school-based transition teams for the children and youth receiving DBH services.

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Submission of a revised state plan to Mo HealthNet (Medicaid) to add Treatment Family Home, Parent Professional Homes, and Family Support Provider services for the Adolescent CSTAR program

Baseline Measurement: N/A

First-year target/outcome measurement: In progress

Second-year target/outcome measurement: Submitted

New Second-year target/outcome measurement(if needed):

Data Source:

The Division of Behavioral Health's Children's Team will collect information related to the progress of the proposal process for submitted revisions to the MO State Plan to CMS.

New Data Source(if needed):**Description of Data:**

The Division of Behavioral Health's Children's Team will collect information related to the progress of the proposal process for submitted revisions to the MO State Plan to CMS.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Completed with revisions. It was decided that only Family Support Provider services would be added to the State Plan.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Completed in FY 2016.

Indicator #:

2

Indicator:

"Monthly" electronic news blast in DBH Newsletter per fiscal year

Baseline Measurement:

N/A

First-year target/outcome measurement:

10

Second-year target/outcome measurement:

10

New Second-year target/outcome measurement(if needed):

Data Source:

Children's Unit will track and report number of news blasts distributed.

New Data Source(if needed):

Description of Data:

Children's Unit will track and report number of news blasts distributed.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Will establish new procedures for submitting and tracking news blasts.

How first year target was achieved (optional):

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Monthly electronic news blast in DBH Newsletter in FY 2017 is 11.

Indicator #: 3
Indicator: Number of DBH staff members participating on state level team per fiscal year
Baseline Measurement: N/A
First-year target/outcome measurement: 3
Second-year target/outcome measurement: 3

New Second-year target/outcome measurement(if needed):

Data Source:

Children's Unit will track and report number of DBH staff participating on the state level transition teams.

New Data Source(if needed):

Description of Data:

Children's Unit will track and report number of DBH staff participating on the state level transition teams.

New Description of Data(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of DBH staff members participating on the state level team in FY 2016 is 3.

Second Year Target: ☐ Achieved ☒ Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number of DBH staff members participating on state level team in FY 2017 is 2. Propose to revise target.

How second year target was achieved (optional):

Indicator #: 4

Indicator: Number of DBH providers participating on local school-based transition teams per fiscal year

Baseline Measurement: N/A

First-year target/outcome measurement: at least 5

Second-year target/outcome measurement: at least 10

New Second-year target/outcome measurement(if needed):

Data Source:

Children's Unit will track and report number of DBH providers participating on local school-based transition teams

New Data Source(if needed):

Description of Data:

Children's Unit will track and report number of DBH providers participating on local school-based transition teams

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How first year target was achieved (optional):

Number of DBH providers participating on local school-based transition teams in FY 2016 is 7.

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of DBH providers participating on local school-based transition teams in FY 2017 is 10.

Priority #: 16

Priority Area: Military Servicemembers and Veterans

Priority Type: SAT, MHS

Population(s): Other (Military Families)

Goal of the priority area:

Increase use of treatment services by servicemembers and veterans

Strategies to attain the goal:

- 1) Enhance identifying military-connected clients during intake
- 2) Promote military cultural competency training with behavioral health professionals
- 3) Reduce stigma to seeking services through education
- 4) Raise awareness of services/programs offered in local communities

Annual Performance Indicators to measure goal success

Indicator #: 1

Indicator: Number of veterans receiving substance use treatment per fiscal year

Baseline Measurement: 2,987 (FY 2014)

First-year target/outcome measurement: 3,046

Second-year target/outcome measurement: 3,107

New Second-year target/outcome measurement(if needed): at least 2,100

Data Source:

DMH information system

New Data Source(if needed):

Description of Data:

Numbers of consumers with military service are determined by consumer military history and includes active, honorable discharged, medical discharged, less than honorable discharged, inactive reserve, active reserve, National Guard, and non-specified Veteran. A

consumer is counted if a paid claim was incurred at a contracted provider or a non-deleted claim was submitted to CIMOR for a state facility.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number of veterans receiving SUD treatment in FY 2016 is 2,335. Revised target for FY 2017.

How first year target was achieved (optional):

Second Year Target: ☒ Achieved ☐ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of veterans receiving SUD treatment in FY 2017 is 2,199.

Indicator #: 2

Indicator: Number of veterans receiving mental health treatment per fiscal year

Baseline Measurement: 1,724 (FY 2014)

First-year target/outcome measurement: 1,758

Second-year target/outcome measurement: 1,793

New Second-year target/outcome measurement(if needed): at least 1,500

Data Source:

DMH information system

New Data Source(if needed):

Description of Data:

Numbers of consumers with military service are determined by consumer military history and includes active, honorable discharged, medical discharged, less than honorable discharged, inactive reserve, active reserve, National Guard, and non-specified Veteran. A consumer is counted if a paid claim was incurred at a contracted provider or a non-deleted claim was submitted to CIMOR for a state facility.

New Description of Data:(if needed)

Data issues/caveats that affect outcome measures:

N/A

New Data issues/caveats that affect outcome measures:

Report of Progress Toward Goal Attainment

First Year Target: ☐ Achieved ☒ Not Achieved (if not achieved,explain why)

Reason why target was not achieved, and changes proposed to meet target:

Number of veterans receiving mental health treatment in FY 2016 is 1,739. Revised target for FY 2017.

How first year target was achieved (optional):

Second Year Target:



Achieved



Not Achieved (if not achieved, explain why)

Reason why target was not achieved, and changes proposed to meet target:

How second year target was achieved (optional):

Number of veterans receiving mental health treatment in FY 2017 is 1,847.

Footnotes:

III: Expenditure Reports

MHBG Table 3 - MHBG Expenditures By Service.

Expenditure Period Start Date: 7/1/2015 Expenditure Period End Date: 6/30/2016

Service	Expenditures
Healthcare Home/Physical Health	\$
Specialized Outpatient Medical Services;	
Acute Primary Care;	
General Health Screens, Tests and Immunizations;	
Comprehensive Care Management;	
Care coordination and Health Promotion;	
Comprehensive Transitional Care;	
Individual and Family Support;	
Referral to Community Services Dissemination;	
Prevention (Including Promotion)	\$
Screening, Brief Intervention and Referral to Treatment ;	
Brief Motivational Interviews;	
Screening and Brief Intervention for Tobacco Cessation;	
Parent Training;	
Facilitated Referrals;	
Relapse Prevention/Wellness Recovery Support;	
Warm Line;	
Substance Abuse (Primary Prevention)	\$
Classroom and/or small group sessions (Education);	
Media campaigns (Information Dissemination);	
Systematic Planning/Coalition and Community Team Building(Community Based Process);	

Parenting and family management (Education);	
Education programs for youth groups (Education);	
Community Service Activities (Alternatives);	
Student Assistance Programs (Problem Identification and Referral);	
Employee Assistance programs (Problem Identification and Referral);	
Community Team Building (Community Based Process);	
Promoting the establishment or review of alcohol, tobacco, and drug use policies (Environmental);	
Engagement Services	\$
Assessment;	
Specialized Evaluations (Psychological and Neurological);	
Service Planning (including crisis planning);	
Consumer/Family Education;	
Outreach;	
Outpatient Services	\$
Evidenced-based Therapies;	
Group Therapy;	
Family Therapy ;	
Multi-family Therapy;	
Consultation to Caregivers;	
Medication Services	\$
Medication Management;	
Pharmacotherapy (including MAT);	
Laboratory services;	
Community Support (Rehabilitative)	\$
Parent/Caregiver Support;	
Skill Building (social, daily living, cognitive);	

Case Management;	
Behavior Management;	
Supported Employment;	
Permanent Supported Housing;	
Recovery Housing;	
Therapeutic Mentoring;	
Traditional Healing Services;	
Recovery Supports	\$
Peer Support;	
Recovery Support Coaching;	
Recovery Support Center Services;	
Supports for Self-directed Care;	
Other Supports (Habilitative)	\$
Personal Care;	
Homemaker;	
Respite;	
Supported Education;	
Transportation;	
Assisted Living Services;	
Recreational Services;	
Trained Behavioral Health Interpreters;	
Interactive Communication Technology Devices;	
Intensive Support Services	\$
Substance Abuse Intensive Outpatient (IOP);	
Partial Hospital;	
Assertive Community Treatment;	

Intensive Home-based Services;	
Multi-systemic Therapy;	
Intensive Case Management ;	
Out-of-Home Residential Services	\$
Children's Mental Health Residential Services;	
Crisis Residential/Stabilization;	
Clinically Managed 24 Hour Care (SA);	
Clinically Managed Medium Intensity Care (SA) ;	
Adult Mental Health Residential ;	
Youth Substance Abuse Residential Services;	
Therapeutic Foster Care;	
Acute Intensive Services	\$
Mobile Crisis;	
Peer-based Crisis Services;	
Urgent Care;	
23-hour Observation Bed;	
Medically Monitored Intensive Inpatient (SA);	
24/7 Crisis Hotline Services;	
Other (please list)	\$
Total	\$0

Footnotes:

III: Expenditure Reports

MHBG Table 4 - Set-aside for Children's Mental Health Services

State Expenditures for Mental Health Services		
Actual SFY 2008	Actual SFY 2016	Estimated/Actual SFY 2017
\$26,706,921	\$33,545,061	\$36,115,926

States are required to not spend less than the amount expended in Actual SFY 2008. This is a change from the previous year, when the baseline for the state expenditures was 1994.

Footnotes:

III: Expenditure Reports

MHBG Table 7 - Maintenance of Effort for State Expenditures on Mental Health Services

Total Expenditures for SMHA		
Period (A)	Expenditures (B)	<u>B1(2015) + B2(2016)</u> 2 (C)
SFY 2015 (1)	\$177,410,823	
SFY 2016 (2)	\$182,426,283	\$179,918,553
SFY 2017 (3)	\$196,078,383	

Are the expenditure amounts reported in Column B "actual" expenditures for the State fiscal years involved?

SFY 2015	Yes	<u>X</u>	No	_____
SFY 2016	Yes	<u>X</u>	No	_____
SFY 2017	Yes	<u>X</u>	No	_____

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

Footnotes: